UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/772,394	01/30/2001	Peter Stangel	79731.010100	1200

22191   7590   05/18/2007

GREENBERG TRAURIG, LLP
1750 TYSONS BOULEVARD, 12TH FLOOR
MCLEAN, VA 22102

EXAMINER
COBANOGLU, DILEK B

ART UNIT	PAPER NUMBER
3626	

NOTIFICATION DATE	DELIVERY MODE
05/18/2007	ELECTRONIC

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Notice of the Office communication was sent electronically on above-indicated "Notification Date" to the following e-mail address(es):

kinneyb@gtlaw.com
goepelj@gtlaw.com
fcronys@gtlaw.com

PTOL-90A (Rev. 04/07)

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE <u>3</u> MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

1) ☒ Responsive to communication(s) filed on <u>20 February 2007</u>.

2a) ☒ This action is **FINAL**.   2b) ☐ This action is non-final.

3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4) ☒ Claim(s) <u>1-3,5-9,12-15 and 17-36</u> is/are pending in the application.

    4a) Of the above claim(s) _____ is/are withdrawn from consideration.

5) ☐ Claim(s) _____ is/are allowed.

6) ☒ Claim(s) <u>1-3,5-9,12-15 and 17-36</u> is/are rejected.

7) ☐ Claim(s) _____ is/are objected to.

8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

9) ☐ The specification is objected to by the Examiner.

10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.

    Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).

    Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).

11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).

    a) ☐ All   b) ☐ Some * c) ☐ None of:

      1. ☐ Certified copies of the priority documents have been received.

      2. ☐ Certified copies of the priority documents have been received in Application No. _____.

      3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

    * See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

1) ☒ Notice of References Cited (PTO-892)

2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)

3) ☒ Information Disclosure Statement(s) (PTO/SB/08)
    Paper No(s)/Mail Date <u>06/14/2001,08/30/2001</u>.

4) ☐ Interview Summary (PTO-413)
    Paper No(s)/Mail Date. _____ .

5) ☐ Notice of Informal Patent Application

6) ☐ Other: _____ .

DETAILED ACTION

1.   This communication is in response to the amendment received on 02/20/2007.

Claims 4, 10-11, 16 have been canceled and claims 30-36 are newly added. Claims 1-

3, 5-9, 12-15, 17-36 remain pending.

Claim Rejections - 35 USC § 103

2.   The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all

obviousness rejections set forth in this Office action:

> (a) A patent may not be obtained though the invention is not identically disclosed or described as set
> forth in section 102 of this title, if the differences between the subject matter sought to be patented and
> the prior art are such that the subject matter as a whole would have been obvious at the time the
> invention was made to a person having ordinary skill in the art to which said subject matter pertains.
> Patentability shall not be negatived by the manner in which the invention was made.

3.   Claims 1-3, 5-9, 12-15, 17-21, 23-28, 30-31, 33-35 are rejected under 35 U.S.C.

103(a) as being unpatentable over Campbell et al. (hereinafter Campbell) (U.S. Patent

No. 6,047,259) in view of Hayward et al. (hereinafter Hayward) (U.S. Patent No.

5,574,828).

A. Claim 1 has been amended now to recite a computer implemented patient

clinical encounter information collection system, comprising:

    i.   a server, wherein the server comprises at least one database, and

wherein the at least one database stores patient clinical encounter

information (Campbell; col. 3, lines 42-50, lines 55-64 and col. 5, lines 3-

12);

    ii.   a user interface, wherein the user interface comprises a plurality of

fields (Campbell; col. 3, lines 35-47, col. 1, lines 62 to col. 2, line 13),

wherein the arrangement of the plurality of fields is fixed and the plurality

of fields are arranged as on a clinical chart, wherein the user interface

presents the plurality of fields in a single screen such that the user need

not scroll the screen when entering data in the plurality of fields, wherein

the user interface facilitates the entry, by a user, of patient clinical

encounter information (Campbell; col. 13, lines 58-65, Figure 5), wherein

the user interface facilitates the selection, by a user, of at least a

diagnosis, and wherein the user interface is stored on the server

(Campbell; col. 1, lines 62-64, col. 3, lines 55-64, Figures 5, 9, 10, 13);

iii.   a client device, wherein the client device is communicatively

coupled to the server, wherein the client device retrieves the user interface

from the server (Campbell; col. 3, line 45 to col. 4, line 11), presents the

user interface to the user, receives patient clinical encounter information

from the user, and submits the patient clinical encounter information to the

server (Campbell; col. 14, lines 19-29, Figure 5), wherein the client device

further comprises:

    a) a navigation module, wherein the navigation module modifies the

    contents of at least a subset of the plurality of fields presented by

    the user interface in response to the diagnosis selected by the user

    (Campbell; col. 14, lines 3-35, Figure 9-10);

    b) a verification module, wherein the verification module determines

    an authorization level for the diagnosis by referring to at least data

in identified <u>user interface fields</u>, the verification module

determining said authorization level prior to submission of the

<u>patient</u> clinical <u>encounter information</u> to <u>the</u> server (Campbell; col.

5, lines 33-61).

- Campbell fails to expressly teach a subset of plurality of fields

  comprises <u>a pop-up list</u>. However, this feature is well known in the

  art, as evidenced by Hayward.

  In particular, Hayward discloses a subset of plurality of fields

  comprises <u>a pop-up list</u> (Hayward; col. 16, line 49 to col. 17, line 3).

  It would have been obvious to one having ordinary skill in the art at

  the time of the invention to include the aforementioned limitation as

  disclosed by Hayward with the motivation of generating second

  program automatically based on the answers to the questions

  (Hayward; abstract).

B. Claim 2 has been amended now to recite the system of claim 1, wherein said

user interface further facilitates selection of one or more criteria corresponding to

the selected diagnosis, and wherein the one or more criteria are selected by the

navigation module from a set of criteria stored in a criteria database <u>and are</u>

<u>presented to the user in one of the plurality of fields </u>(Campbell; col. 14, lines 30-

52).

C. As per claim 3, Campbell discloses the system of claim 2, wherein said

authorization level is determined at least in part by the selected criteria

(Campbell; col. 5, lines 35-61).

D. Claim 5 has been amended now to recite the system of claim 1, wherein said

verification module is coupled to a rule database, <u>wherein the rule database</u>

<u>retrieves</u> stored rules <u>from</u> the server, and <u>wherein the rule database</u> is employed

by the verification module in determining said authorization level (Campbell; col.

6, lines 23-36).

E. As per claim 6, Campbell discloses the system of claim 5, wherein the rule

database stores at least two levels of rules, said levels comprising:

 i. a criteria level, the criteria level rules determining a criteria status

by referring to data from the identified fields of said clinical record

(Campbell; col. 16, line 66 to col. 17, line 7); and

 ii. a diagnosis level, the diagnosis level rules determining a diagnosis

authorization level by referring to the criteria status of associated criteria

(Campbell; col. 5, lines 33-61 and col. 17, lines 8-10).

F. Claim 7 has been amended now to recite the system of claim 1, <u>wherein: at</u>

<u>least a subset of the plurality of fields presented in the user interface are related</u>

<u>in a hierarchical manner, and wherein the navigation module changes the</u>

<u>content of at least a subset of the plurality of fields based on selections made</u>

<u>therein by the user</u> (Campbell; col. 12, line 59 to col. 13, line 18).

G. Claim 8 has been amended now to recite a method for facilitating the submission of a clinical record for automated processing, comprising:

    i.   providing at least one selection interface, wherein the selection interface facilitates selection by a user of one of a plurality of predetermined clinical data types (Campbell; col. 12, lines 14-21), the predetermined clinical data types comprising data necessary for creating at least a record of the symptoms associated with a patient and a diagnosis (Campbell; col. 12, lines 13-20, Figure 4-5);

    ii.   receiving a selection from said selection interface; and providing at least one data field in response to said selection, wherein the data field is a quantified data field associated with an objective criteria, and whereby said quantified data field facilitates automated processing of said clinical record (Campbell; col. 12, lines 13-20, Figure 4-5).

H. Claim 9 has been amended now to recite a method of generating an electronic clinical record, comprising:

    i.   receiving a diagnosis from a user via a user interface running on a client device (Campbell; col. 16, lines 33-42);

    ii.   permitting the user to select a criteria from a pre-defined list of criteria associated with the entered diagnosis, the criteria associated with a rule required for confirming the entered diagnosis, the criteria associated with at least one finding (Campbell; col. 16, lines 43-54);

      iii.   <u>receiving from the user</u> data corresponding to at least a subset of

the at least one finding associated with the <u>user selected</u> criteria

(Campbell; col. 12, line 59 to col. 13, line 20);

      iv.   <u>verifying that all necessary data associated with the diagnosis has</u>

<u>been received from the user</u> (Campbell; col. 12, line 59 to col. 13, line 20);

      v.   <u>transmitting the data received from the user to a server;</u> and

generating an electronic clinical record based on the <u>data received from</u>

<u>the user</u> (Campbell; col. 12, line 59 to col. 13, line 20 and col. 17, lines 8-

10)

I.   Claim 12 has been amended now to recite an interface for entering data for

evaluation of a clinical encounter, comprising an interactive set of lists, wherein

each of the lists in the interactive set of lists has its own domain (Campbell; col.

17, lines 46-52, Figure 10), wherein each of the lists in the interactive set of lists

is displayed as a separate pop-up button list, <u>wherein at least a subset of the lists</u>

<u>in the interactive set of lists are hierarchically related</u> (Campbell; col. 12, line 59

to col. 13, line 20), and wherein the interactive set of lists is formatted to be

similar to a clinical chart (Campbell; col. 1, line 62 to col. 2, line 13).

J.   As per claim 13, Campbell discloses the interface of claim 12 further

comprising a display area, wherein the display area displays a parameter and at

least one corresponding finding by displaying each parameter proximate to the

associated at least one finding (Campbell; col. 16, line 66 to col. 17, line 7, Figure

5).

Examiner considers that observations would include related parameters.

K. As per claim 14, Campbell discloses the interface of claim 12 further comprising a data entry area, wherein the data entry area is adapted to facilitate entry of more than one finding for a parameter (Campbell; col. 13, line 58 to col. 14, line 8, Figure 5).

L. Claim 15 has been amended now to recite a method for processing patient clinical data by a health care organization, comprising:

i.   establishing a server computer, wherein a plurality of forms facilitating the entry of patient clinical data in clinical chart form are stored on the server computer (Campbell; col. 5, lines 33-38, Figures3-7), <u>wherein a first set of rules are stored on the server computer, the first set of rules facilitating the authorization of at least one diagnosis based on associated clinical patient encounter criteria</u> (Campbell; col. 6, lines 23-36)<u>, and wherein a second set of rules are stored on the server computer, the second set of rules facilitating the evaluation of clinical patient encounter data</u> (Campbell; col. 16, line 66 to col. 17, line 7)<u>;</u>

ii.   establishing a user site (Campbell; col. 5, lines 33-38, Figure 2); interconnecting the server computer and the user site (Campbell; col. 5, lines 33-38, Figure 2);

iii.   retrieving from the server computer at least one of the plurality of forms for display and editing at the user site, <u>the first set of rules and the second set of rules</u> (Campbell; col. 12, lines 13-20)<u>;</u>

    iv.   configuring at least a first subset of forms to apply <u>the</u> first set of

rules to at least a first subset of inputs entered into the first subset of

forms, <u>wherein the first set of rules are applied at the user site </u>(Campbell;

col. 6, lines 23-30);

    v.   configuring at least a second subset of forms to apply <u>the</u> second of

set of rules to at least a second subset of inputs entered into the second

subset of forms, <u>wherein the second set of rules are applied at the user</u>

<u>site </u>(Campbell; col. 16, line 66 to col. 17, line 7);

    vi.   receiving patient clinical encounter data from at least one user

interacting with the user site (Campbell; col. 16, lines 33-54); and

    vii.   processing the received patient clinical encounter data

automatically in accordance with the first and second set of rules

(Campbell; col. 6, lines 23-36, col. 16, line 66 to col. 17, line 7).

M. Claim 17 has been amended now to recite the method of claim 15, <u>wherein</u>

<u>the first set of rules and the second set of rules are applied when a user enters</u>

<u>the information associated therewith into the user form</u> (Campbell; col. 6, lines

23-36, col. 16, line 66 to col. 17, line 7).

N. Claim 18 has been amended now to recite a method for facilitating the single

screen submission of patient clinical data in a computer implemented patient

care review system, comprising:

    i.   providing a clinical element selection interface, the clinical element

selection interface facilitating the selection of a clinical element, wherein

the selectable clinical elements comprise at least one of history and exam

(Campbell; col. 13, lines 58-65);

ii.   providing a system/group selection interface, the system/group

selection interface facilitating the selection of a system/group associated

with the selected clinical element <u>and wherein the system/group interface</u>

<u>is populated based on the selected clinical element </u>(Campbell; col. 13,

line 66 to col. 14, line 8); and

iii.   providing a parameter selection interface, the parameter selection

interface facilitating the selection of a parameter associated with the

selected system/group, <u>and wherein the parameter selection interface is</u>

<u>populated based on the selected system/group;</u> wherein the element

selection interface, the system/group selection interface, and the

parameter selection interface are displayed within a single screen

(Campbell; col. 13, line 66 to col. 14, line 8, Figure 5).

O. Claim 19 has been amended now to recite a method for providing an

indication of appropriateness of a patient clinical encounter to a user of an

electronic clinical charting system, <u>wherein the electronic clinical charting</u> system

facilitates the submission of diagnosis-relevant clinical data associated with the

patient clinical encounter, comprising:

i.   providing a criteria selection interface <u>on a client computing device,</u>

wherein the criteria selection interface allows the user to select a

diagnosis-based criteria (Campbell; col. 16, lines 33-42);

ii.   receiving diagnosis related data from the user (Campbell; col. 16,

line 66 to col. 17, line 10);

iii.   applying a verification rule to the received data, <u>wherein the</u>

<u>verification rule is applied on by the client computing device</u> (Campbell;

col. 16, line 66 to col. 17, line 10); and

iv.   providing a verification result indication, the indication provided

within each selected criterion in the criteria selection interface, and

wherein the indication conveys each criterion authorization level

(Campbell; col. 16, line 66 to col. 17, line 10).

P. As per claim 20, Campbell discloses the method of claim 19, wherein patient

clinical encounter information is presented on a user computer with relevant

clinical data in clinical format that is familiar to clinicians and healthcare

reviewers (Campbell; col. 3, lines 35-47, col. 16, lines 23-30).

Q. Claim 21 has been amended now to recite the method of claim 20, wherein

criteria guided clinical <u>data</u> entry is done by users who are at least one of

clinicians or clinician aids at the site of the patient encounter (Campbell; col. 2,

lines 14-21, col. 5, lines 33-61).

R. As per claim 23 Campbell discloses the interface of claim 12, wherein at least

four lists are displayed and include at least one of an Element list, a

System/Group list, a Parameter list, and a Finding list (Campbell; col. 12, lines

14-21, col. 12, line 59 to col. 13, line18, Figure 4).

> o   The obviousness of modifying the teaching of Campbell to include
>
> the pop-up button list (as taught by Hayward) is as addressed
>
> above in the rejection of claim 1 and incorporated herein.

S. Claim 24 has been amended now to recite the interface of claim 23, wherein

the at least four lists are hierarchically related, and wherein a selection in one

pop-up list populates at least the next lower pop-up button list in the hierarchy

(Campbell; col. 12, line 59 to col. 13, line18, Figure 4).

T. Claim 25 has been amended now to recite the interface of claim 23, wherein

> i.   selection of an entry in the Element list populates the
>
> System/Group list with available entries (Campbell; col. 12, line 59 to col.
>
> 13, line18),
>
> ii.   selection of an entry in the System/Group list populates the
>
> Parameter list with available entries (Campbell; col. 13, line 58-65),
>
> iii.   selection of an entry in the Parameter list populates the Finding list
>
> with available entries (Campbell; col. 13, line 58 to col. 14, line 8), and
>
> iv.   selection of an entry in a Finding list either:
>
> a) enters the selected Finding with the selected Parameter into a
>
> chart note data field in the clinical chart formatted on-screen display
>
> (Campbell; col. 13, line 58 to col. 14, line 8); or
>
> b) prompts a user to enter a numeric value to be associated with
>
> the Finding, and wherein the Finding and its associated value,
>
> along with the selected Parameter, are entered into a chart note

data field in the <u>clinical chart</u> formatted on screen display

(Campbell; col. 13, line 58 to col. 14, line 8).

o   The obviousness of modifying the teaching of Campbell to include

the pop-up button list (as taught by Hayward) is as addressed

above in the rejection of claim 1 and incorporated herein.

U. As per claim 26 Campbell discloses the interface of claim 25, wherein a

selection in a criteria list populates the Element list, System/Group list,

Parameter list and Finding list to enable the user to select the Finding (Campbell;

col. 12, line 59 to col. 13, line 18 and col. 13, line 58 to col. 14, line 8).

o   The obviousness of modifying the teaching of Campbell to include

the pop-up button list (as taught by Hayward) is as addressed

above in the rejection of claim 1 and incorporated herein.

V. Claim 27 has been amended now to recite the interface of claim 26, wherein

only two steps are necessary to enter diagnosis-relevant clinical <u>data</u>:

a) a selection in the criteria list which either prompts selection of a finding

from the Finding List (Campbell; col. 13, line 58 to col. 14, line 8, Figure 4-

5), or

b) for a numerical finding, selects the finding and prompts for the

numerical value (Campbell; col. 13, line 58 to col. 14, line 8, Figure 4-5).

o   The obviousness of modifying the teaching of Campbell to include

the pop-up button list (as taught by Hayward) is as addressed

above in the rejection of claim 1 and incorporated herein.

W. Claim 28 has been amended now to recite the interface of claim 27, where similarly a selection in an additional info list sets the Element list, System/Group list, Parameter list and Finding list to enable the user to select the Finding (Campbell; col. 13, line 58 to col. 14, line 8, Figure 4-5).

- The obviousness of modifying the teaching of Campbell to include the pop-up button list (as taught by Hayward) is as addressed above in the rejection of claim 1 and incorporated herein.

X. Newly added claim 30 recites the system of Claim 7, wherein the verification module further comprises a plurality of criteria rules, and wherein the criteria rules are evaluated by the verification module to determine whether data entered by the user meets one or more criteria for determining an authorization level (Campbell; col. 5, lines 33-61).

Y. Newly added claim 31 recites the system of Claim 1, wherein the communicative coupling between the client and the server comprises an Internet connection (Campbell; col. 5, lines 19-32).

Z. Newly added claim 33 recites the method of Claim 9, wherein the data received from the user is transmitted to the server via the Internet (Campbell; col. 5, lines 19-32).

AA.   Newly added claim 34 recites the method of Claim 15, wherein the server site and the user site are interconnected via the Internet (Campbell; col. 5, lines 19-32).

BB.   Newly added claim 35 recites the method of Claim 19, wherein the criteria

selection interface is obtained from a server, and wherein the server and the

client computing device are interconnected via the Internet (Campbell; col. 5,

lines 33-61).

4.   Claims 22, 29 and 36 are rejected under 35 U.S.C. 103(a) as being unpatentable

over Campbell et al. (hereinafter Campbell) (U.S. Patent No. 6,047,259), Hayward et al.

(hereinafter Hayward) (U.S. Patent No. 5,574,828), Johnson et al. (hereinafter Johnson)

(U.S. Patent No. 5,664,109) and further in view of Cummings, Jr. (hereinafter

Cummings) (U.S. Patent No. 5,301,105).

A. Claim 22 has been amended now to recite the method of claim 21 wherein

criteria guided entry of relevant clinical data is made in a screen display requiring

no scrolling (Campbell; col. 13, lines 58-65, Figure 5), and wherein the screen

display expedites transformation of physical patient charts into electronic format

for review by health care review organizations.

Campbell fails to expressly teach transformation of physical patient

charts into electronic format. However, this feature is well known in

the art, as evidenced by Johnson.

In particular, Johnson discloses transformation of physical patient

charts into electronic format (Johnson; abstract and col. 2, lines 13-

42).

It would have been obvious to one having ordinary skill in the art at

the time of the invention to include the aforementioned limitation as

disclosed by Johnson with the motivation of providers able to use

their preexisting information systems to send documents to a

central data processing system and collection and analysis of

patient information without imposing significant extra cost (Johnson;

col. 2, lines 13-42).

Campbell fails to expressly teach transformation of physical patient

charts for review by health care review organizations. However, this

feature is well known in the art, as evidenced by Cummings.

In particular, Cummings discloses transformation of physical patient

charts for review by health care review organizations (Cummings;

abstract and col. 2, line 65 to col. 3, line 2).

It would have been obvious to one having ordinary skill in the art at

the time of the invention to include the aforementioned limitation as

disclosed by Cummings with the motivation of improving diagnosis,

treatment and cost effectiveness (Cummings; col. 3, lines 3-6).

B. Claim 29 has been amended now to recite an electronic clinical record creation

and review system comprising:

i)   a user interface, wherein the user interface prompts for clinically relevant

inputs which are used to generate an electronic record of a patient clinical

encounter, wherein the clinically relevant inputs comprise a diagnosis and at

least one patient symptom, wherein the at least one symptom is clinically

relevant to the diagnosis, and wherein sufficient symptoms are prompted for

to verify the diagnosis (Campbell; col. 1, line 62 to col. 2, line 13);

ii) a communications interface, whereby the electronic clinical record is

transmitted to a health care reviewing organization for review; and

iii) a clinical data evaluation module, wherein the clinical data evaluation module

automatically evaluates clinical data stored in the electronic clinical record for

individual criteria and for the patient clinical encounter, wherein the review

comprises at least a review of the diagnosis, the clinical data comprising

patient symptoms (Campbell; col. 16, line 66 to col. 17, line 7).

- The obviousness of modifying the teaching of Campbell to include

  electronic clinical record is transmitted to a health care reviewing

  organization for review (as taught by Cummings) is as addressed

  above in the rejection of claim 22 and incorporated herein.

C. Newly added claim 36 discloses the system of Claim 29, wherein the

communications interface facilitates transmission of the clinical record to the

health care reviewing organization via the Internet. Campbell discloses

communications interface facilitates transmission of the clinical record via the

Internet (Campbell; col. 5, lines 33-61)

- The obviousness of modifying the teaching of Campbell to include

  electronic clinical record is transmitted to a health care reviewing

  organization for review (as taught by Cummings) is as addressed

  above in the rejection of claim 22 and incorporated herein.

5.   Claim 32 is rejected under 35 U.S.C. 103(a) as being unpatentable over

Campbell et al. (hereinafter Campbell) (U.S. Patent No. 6,047,259), Hayward et al.

(hereinafter Hayward) (U.S. Patent No. 5,574,828), Johnson et al. (hereinafter Johnson)

(U.S. Patent No. 5,664,109), Cummings, Jr. (hereinafter Cummings) (U.S. Patent No.

5,301,105) and further in view of Kaker et al. (hereinafter Kaker) (U.S. Patent

Publication No. 2001/0037218 A1).

     A. As per newly added claim 32, Campbell discloses the method of claim 8.

          Campbell fails to expressly teach at least one data field are

          provided via an HTML web page on the Internet. However, this

          feature is well known in the art, as evidenced by Kaker.

          In particular, Kaker discloses at least one data field are provided via

          an HTML web page on the Internet (Kaker; paragraphs: 0055-

          0056).

          It would have been obvious to one having ordinary skill in the art at

          the time of the invention to include the aforementioned limitation as

          disclosed by Kaker with the motivation of medical professionals,

          hospitals, organizations to access letters and forms (Kaker;

          paragraph: 0004).

Response to Arguments

5.   Applicant's arguments with respect to claims 1-3, 5-9, 12-15, 17-36 have been

considered but are moot in view of the new ground(s) of rejection.

Conclusion

6.   **THIS ACTION IS MADE FINAL.** Applicant is reminded of the extension of time

policy as set forth in 37 CFR 1.136(a).

7.   A shortened statutory period for reply to this final action is set to expire THREE

MONTHS from the mailing date of this action. In the event a first reply is filed within

TWO MONTHS of the mailing date of this final action and the advisory action is not

mailed until after the end of the THREE-MONTH shortened statutory period, then the

shortened statutory period will expire on the date the advisory action is mailed, and any

extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of

the advisory action. In no event, however, will the statutory period for reply expire later

than SIX MONTHS from the mailing date of this final action.

8.   Any inquiry concerning this communication or earlier communications from the

examiner should be directed to Dilek B. Cobanoglu whose telephone number is 571-

272-8295. The examiner can normally be reached on 8-4:30.

9.   If attempts to reach the examiner by telephone are unsuccessful, the examiner's

supervisor, Joseph Thomas can be reached on 571-272-6776. The fax phone number

for the organization where this application or proceeding is assigned is 571-273-8300.

10.   Information regarding the status of an application may be obtained from the

Patent Application Information Retrieval (PAIR) system. Status information for

published applications may be obtained from either Private PAIR or Public PAIR.

Status information for unpublished applications is available through Private PAIR only.

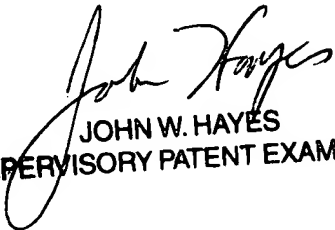For more information about the PAIR system, see http://pair-direct.uspto.gov. Should

you have questions on access to the Private PAIR system, contact the Electronic

Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a

USPTO Customer Service Representative or access to the automated information

system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

DBC
Art Unit 3626
05/08/2007

JOHN W. HAYES
SUPERVISORY PATENT EXAMINER